

## Court Appointed Attorney Certification Renewal Application

After initially qualifying for *felony and misdemeanor certification*, an attorney shall maintain his or her eligibility by completing biennially thereafter at least six hours of MCLE-approved continuing legal education, certified by the VIDC.

In addition, to maintain eligibility for *capital certification*, an attorney shall complete biennially at least six hours of specialized training in capital litigation, plus at least four hours of specialized training required by Virginia Code §19.2-163.8(A)(vii).

To maintain eligibility to accept court appointments in *juvenile delinquency* cases under Virginia Code § 16.1-266(B)(2), an attorney shall complete biennially four additional hours of MCLE-approved continuing legal education on representing juveniles, certified by the VIDC. Virginia Code §19.2-163.03(D)

1. Name: \_\_\_\_\_  
First Middle Last
2. Virginia State Bar Number \_\_\_\_\_
3. I have been certified as appointed counsel in the following types of cases:  
☐ Misdemeanor ☐ Felony ☐ Juvenile and Domestic Relations ☐ Capital Trial Lead Counsel ☐ Capital Trial Co-Counsel  
☐ Capital Appellate ☐ Capital Habeas
4. Has your contact information changed since your initial application? ☐ Yes ☐ No
5. If Yes to 4, enter the new contact information.

Work Address: Firm Name: \_\_\_\_\_

PO Box: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Work Email Address: \_\_\_\_\_

Work Fax Number: \_\_\_\_\_

6. List the MCLE-approved continuing legal education courses certified by the VIDC that you have attended during the preceding two years. A list of MCLE courses certified by the VIDC can be found at [www.indigentdefense.virginia.gov](http://www.indigentdefense.virginia.gov).

MCLE Course	Date(s) of Course	Credits Earned (Juvenile CLE)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Certification of Truth Statement** - I hereby certify that the answers provided to the above questions are true and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return completed application to:  
Attorney Certification  
Virginia Indigent Defense Commission  
1604 Santa Rosa Rd., Suite 109  
Richmond, VA 23229  
Phone: (804) 662-7249 extension 47  
Fax: (804) 662-7452